

Submit 1 Copy To Appropriate District Office  
 District I - (575) 393-6161  
 1625 N. French Dr., Hobbs, NM 88240  
 District II - (575) 748-1283  
 811 S. First St., Artesia, NM 88210  
 District III - (505) 334-6178  
 1000 Rio Brazos Rd., Aztec, NM 87410  
 District IV - (505) 476-3460  
 1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico  
 Energy, Minerals and Natural Resources

Form C-103  
 Revised August 1, 2011

OIL CONSERVATION DIVISION  
 1220 South St. Francis Dr.  
 Santa Fe, NM 87505

WELL API NO. 30-025-40451
5. Indicate Type of Lease STATE <input checked="" type="checkbox"/> FEE <input type="checkbox"/>
6. State Oil & Gas Lease No. VO 7969
7. Lease Name or Unit Agreement Name Lennox 32 State
8. Well Number 2H
9. OGRID Number 249099
10. Pool name or Wildcat Rock Lake, Bone Springs
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 3525' GR

**SUNDRY NOTICES AND REPORTS ON WELLS**  
 (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)

1. Type of Well: Oil Well  Gas Well  Other

2. Name of Operator  
Caza Operating, LLC

3. Address of Operator  
200 N. Loraine, Suite 1550, Midland, Texas 79701

4. Well Location  
 Unit Letter A : 330 feet from the North line and 660 feet from the East line  
 Section 32 Township 22-S Range 35-E NMPM County Lea

11. Elevation (Show whether DR, RKB, RT, GR, etc.)  
3525' GR

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

<b>NOTICE OF INTENTION TO:</b>		<b>SUBSEQUENT REPORT OF:</b>	
PERFORM REMEDIAL WORK <input type="checkbox"/>	PLUG AND ABANDON <input type="checkbox"/>	REMEDIAL WORK <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
TEMPORARILY ABANDON <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	COMMENCE DRILLING OPNS. <input type="checkbox"/>	P AND A <input type="checkbox"/>
PULL OR ALTER CASING <input type="checkbox"/>	MULTIPLE COMPL <input type="checkbox"/>	CASING/CEMENT JOB <input type="checkbox"/>	
DOWNHOLE COMMINGLE <input type="checkbox"/>			
OTHER: <input type="checkbox"/>		OTHER: Squeeze 1st Bone Springs Sand <input checked="" type="checkbox"/>	

13. Describe proposed or completed operations. (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 19.15.7.14 NMAC. For Multiple Completions: Attach wellbore diagram of proposed completion or recompletion.

6-(15-24)-2013\_ 1st Bone Springs perms 9945-49, 9864-69 & 9789-94 proved wet with 100% sulfur water in swab recovery. Squeeze perms with total of 300 sks 50/50 poz "H" 14.3 ppg + 250 sks "H" 15.6 ppg in 3 tries. Final squeeze pressure 7500 psi. Tested perms to 2200 psi for 30 minutes. OK. Start test sub pump installation.

Spud Date: February 29, 2012 Rig Release Date: April 2, 2013

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE *Richard L. Wright* TITLE Operations Manager DATE 6-25-2013

Type or print name Richard L. Wright E-mail address: rwright@cazapetro.com PHONE: 432 682 7424

APPROVED BY: *[Signature]* TITLE Dist. MGR DATE 7-2-2013  
 Conditions of Approval (if any):

JUL 02 2013